

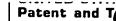
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/750,765	12/28/2000	Mitchell R. Swartz		8044	
· -	590 01/02/2003				
	wartz, ScD, EE, MD	EXAMINER			
16 Pembroke Road Weston, MA 02493			PALABRÍCA, RICARDO J		
			ART UNIT	PAPER NUMBER	
			3641	14	
			DATE MAILED: 01/02/2003	. " (

Please find below and/or attached an Office communication concerning this application or proceeding.





emark Office

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			ART UNIT	PAPER NUMBER	
			DATE MAILED:		
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INFO	RMALITY RE PAYM	ENT OF FEE			

The informality regarding the payment of the fee in connection with ___ the original filing fee _____ the amendment filed _____ is indicated below. A. FEE DUE 1. The amendment is considered incomplete in that the funds in Deposit Account No. __ are insufficient to cover the entire fee due. The balance is due within the period set below. 2. The amendment is considered an incomplete response, in that payment of \$____ cover the claims as shown in the attached Patent Application Fee Determination Record. Remittance is due within the period set below. 3. ___ The amendment has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the period set below. 4. The filing fee of \$____ _____ submitted in this application is insufficient. A balance of \$ _______ is due for additional claims. 5. APPLICANT IS GIVEN THE REMAINDER OF THE SET PERIOD FOR RESPONSE, OR ONE (I) MONTH FROM THE DATE OF THIS LETTER, WHICHEVER IS LONGER, WITHIN WHICH TO REMIT THE FEE OF \$ **B. EXCESS PAYMENT:** 5. It is noted that payment of \$_____ is in excess of the amount necessary to cover the claims now in the application. See the attached Patent Application Fee Determination Record. This matter of refund or credit to your account is being referred to the Finance Officer, for his consideration.

PTOL-319 (REV. 3-82)

USCOMM-DC 82-3838-P82